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CONFIRMATION NO. 1681

Bib Data Sheet

SERIAL NUMBER 10/652,645	FILING OR 371(c) DATE 08/28/2003 RULE	CLASS 370	GROUP ART UNIT 2616	ATTORNEY DOCKET NO. 6770P002
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APPLICANTS

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**** CONTINUING DATA****** FOREIGN APPLICATIONS**

UNITED KINGDOM 0220114.3 08/30/2002
 UNITED KINGDOM 0229048.4 12/12/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/04/2003

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 2	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>			

ADDRESS

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TITLE

Adaptive clock recovery

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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